

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13618

FILED  
May 28, 2008  
Secretary of State

Entity Name: JACKSONVILLE GEM AND MINERAL SOCIETY, INC.

**Current Principal Place of Business:**

JACKSONVILLE GEM & MINERAL SOCIETY, INC.  
6653 POWERS AVE, SUITE 132  
JACKSONVILLE, FL 32217 US

**New Principal Place of Business:**

**Current Mailing Address:**

JACKSONVILLE GEM & MINERAL SOCIETY, INC  
6653 POWERS AVE. SUITE 132  
JACKSONVILLE, FL 32217 US

**New Mailing Address:**

FEI Number: 59-2931144      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

HAMILTON, JASON J  
7141 NATAL AVE  
JACKSONVILLE, FL 32254 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HAMILTON, JASON  
Address: 7141 NATAL AVE  
City-St-Zip: JACKSONVILLE, FL 32254

Title: VPD ( ) Delete  
Name: FRAME, TOM  
Address: 3133 CHAPELWOOD  
City-St-Zip: JACKSONVILLE, FL 32216

Title: SD ( ) Delete  
Name: ROBERTS, MARY LOU  
Address: 9359 103RD ST #9  
City-St-Zip: JACKSONVILLE, FL 32210

Title: D ( ) Delete  
Name: CARLSON, EARL  
Address: 1631 MCCAUL RD  
City-St-Zip: JACKSONVILLE, FL 32220

Title: D ( ) Delete  
Name: THOMPSON, ROBERT  
Address: 905 INWOOD TERRACE  
City-St-Zip: JACKSONVILLE, FL 32207

Title: TD ( ) Delete  
Name: ROSE, HARRIET  
Address: 3713 PONCE DE LEON AVE  
City-St-Zip: JACKSONVILLE, FL 32217

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: CECIL, MICKEY  
Address: 1121 MONTEGO ROAD W  
City-St-Zip: JACKSONVILLE, FL 32216

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HARRIET C. ROSE

TD

05/28/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date